



JULY 2005 MONTHLY REPORT
(Updated February 2006)

Due to the transition of HIRSP plan administrator services to a new contractor effective April 1, 2005 claims volumes and payments and other operational statistics will be different than previous months and should not be used for comparisons.
July 2005 Monthly Report - Updated February 2006

**WISCONSIN HEALTH INSURANCE RISK SHARING PLAN
MONTHLY STATISTICS FOR JULY 2005 MONTH END
EXECUTIVE SUMMARY**

	July 2005*	January 2005
Bank Summary		
Checkwrite	\$7,059,006.54	\$6,487,356.93
Book Balance (US Bank & State General Account)	\$44,046,067.00	\$43,348,568.00
Enrollment		
Plan 1A	7,977	7,757
Plan 1B	9,784	9,150
Plan 2	1,734	1,726
Total	19,495	18,633
New Applications Received	659	231
Claims		
Claims Processed	100,842	98,776
Average Processing Days	11.30	13.00
Claim Inventory - Over 30 Days Old	1,692	868
Claim Inventory - Total	13,541	8,925
Claims Denied (NonPBM)	7,438	9,172
Claims Denied (PBM)	18,594	8,664
Claim Accuracy Performance	99.88%	100.00%
Customer Service/Policyholder Services		
Number of Calls Received	12,293	10,390
Percentage of Calls Answered	98.80%	90.40%
Written Correspondence - Received	235	589
Written Correspondence - Completed	249	595
Written Correspondence - Inventory	12	33
Average Hold Time for Telephone Calls	0.25	4.23

***Please note: Due to the transition of HIRSP plan administration services to a new contractor effective April 1, 2005 claims volumes, payments and other operational statistics may be accounted for differently. Care should be used when trying to compare data from prior to April 1, 2005 to data from April 1, 2005 going forward.**

Also note that adjustments as reported by the previous administrator are no longer being counted in reports found on pages 26, 27 and 28 beginning with April 2005 data.

**WISCONSIN HEALTH INSURANCE RISK SHARING PLAN
JULY 2005 MONTHLY REPORT
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Due to the transition of HIRSP plan administrator services to a new contractor effective April 1, 2005 claims volumes and payments and other operational statistics will be different than previous months and should not be used for comparisons.

July 2005 Monthly Report - Updated February 2006

Wisconsin Health Insurance Risk-Sharing Plan

Breakdown of Incurred Claims and Earned Premium by Quarter and Plan

4Q03					
Plan	Total Dollars			Per Member Per Month	
	Incurred Claims	Earned Premium	Loss Ratio	Incurred Claims	Earned Premium
Plan 1A	\$22,755,658	\$10,825,220	210.2%	\$894.34	\$425.45
Plan 1B	9,585,581	8,013,666	119.6%	436.24	364.71
Plan 2	4,472,245	2,062,818	216.8%	858.56	396.01
Total	\$36,813,484	\$20,901,704	176.1%	\$699.53	\$397.17
1Q04					
Plan	Total Dollars			Per Member Per Month	
	Incurred Claims	Earned Premium	Loss Ratio	Incurred Claims	Earned Premium
Plan 1A	\$19,688,284	\$10,273,986	191.6%	\$802.36	\$418.70
Plan 1B	9,728,943	8,769,984	110.9%	404.40	364.54
Plan 2	3,991,381	2,060,924	193.7%	763.61	394.28
Total	\$33,408,609	\$21,104,894	158.3%	\$620.71	\$392.12
2Q04					
Plan	Total Dollars			Per Member Per Month	
	Incurred Claims	Earned Premium	Loss Ratio	Incurred Claims	Earned Premium
Plan 1A	\$21,923,781	\$10,446,926	209.9%	\$875.83	\$417.34
Plan 1B	11,149,215	9,078,492	122.8%	447.47	364.36
Plan 2	4,689,568	2,092,994	224.1%	892.06	398.13
Total	\$37,762,564	\$21,618,413	174.7%	\$684.04	\$391.60
3Q04					
Plan	Total Dollars			Per Member Per Month	
	Incurred Claims	Earned Premium	Loss Ratio	Incurred Claims	Earned Premium
Plan 1A	\$21,167,603	\$11,627,516	182.0%	\$857.30	\$470.92
Plan 1B	11,462,876	10,348,024	110.8%	453.98	409.82
Plan 2	4,803,300	2,438,376	197.0%	924.96	469.55
Total	\$37,433,779	\$24,413,917	153.3%	\$678.96	\$442.81
4Q04					
Plan	Total Dollars			Per Member Per Month	
	Incurred Claims	Earned Premium	Loss Ratio	Incurred Claims	Earned Premium
Plan 1A	\$25,319,831	\$11,459,604	220.9%	\$1,037.61	\$469.62
Plan 1B	14,542,339	10,461,572	139.0%	568.66	409.09
Plan 2	5,108,171	2,436,761	209.6%	986.32	470.51
Total	\$44,970,341	\$24,357,937	184.6%	\$815.36	\$441.64
1Q05					
Plan	Total Dollars			Per Member Per Month	
	Incurred Claims	Earned Premium	Loss Ratio	Incurred Claims	Earned Premium
Plan 1A	\$22,354,900	\$10,770,000	207.6%	\$964.03	\$464.44
Plan 1B	12,414,834	11,328,000	109.6%	443.42	404.60
Plan 2	4,452,028	2,380,000	187.1%	870.39	465.30
Total	\$39,221,762	\$24,478,000	160.2%	\$696.63	\$434.76

NOTES:

Loss Ratio = Incurred Claims / Earned Premiums

Earned Premium includes Premium Subsidies

Incurred Claims include Provider Contributions

Administrative Expenses are not included in this exhibit

Incurred Claims and Earned Premiums are updated quarterly and restated to reflect the most current information available as of June 30, 2005

Due to the transition of HIRSP plan administrator services to a new contractor effective April 1, 2005 claims volumes and payments and other operational statistics will be different than previous months and should not be used for comparisons.

**Wisconsin Health Insurance Risk Sharing Plan
Financial Report Notes
For the Period Ending July 31, 2005**

The motions adopted by the HIRSP Board of Governors regarding changes are summarized as follows:

- 1) Convene the Actuarial Advisory Subcommittee for the purpose of advising the FOC and Board regarding a market-based benchmark for program costs for use in establishing the SFY06 Budget.
- 2) The Board acknowledges that the current problem of the growing provider contribution and program costs is a function of several factors including increasing provider charges and provider payment rates not keeping pace with inflation. The Board acknowledges that the above referenced motion is an interim solution and would have recommended a 5% provider payment increase effective March 1, 2005 if not for administrative issues associated with the April 1, 2005 transition of plan administrators. The Board will reduce the SFY06 provider surplus by \$1.5 million to compensate for not changing the provider payment rate effective April 1, 2005.

**Wisconsin Health Insurance Risk Sharing Plan
Financial Report Notes
For the Period Ending July 31, 2005**

These monthly reports do not include the June 30, 2002 CAFR¹ (Combined Annual Financial Report) adjustments. When these adjustments are available, the monthly report will reflect these changes. Previously issued monthly reports will not be reissued but the financial statement notes for the current month will summarize the CAFR adjustment.

- 1) **Policyholder Retained Earnings, End of Period (page 3 & 9)**
The policyholder retained earnings include both assigned and unassigned surplus (see Interim Reconciliation page 6 and 12 for the breakdown)
- 2) **Other Receivables (page 7 & 13)**
Claims expense and receivables are adjusted monthly to account for doubtful receivables per GASB 38.
- 3) **Losses Paid or Approved for Payment (page 3 & 9)**
Claims expense and receivables are adjusted monthly to account for doubtful receivables per GASB 38.

¹ CAFR is the State of Wisconsin annual financial report published by DOA (Dept. of Admin.) and prepared in accordance with GASB (Governmental Accounting Standards Board).

Due to the transition of HIRSP plan administrator services to a new contractor effective April 1, 2005 claims volumes and payments and other operational statistics will be different than previous months and should not be used for comparisons.

**Wisconsin Health Insurance Risk Sharing Plan
for the Period Ended July 31, 2005
Fiscal Year 2006**

Unaudited Statement of Revenues, Expenses, and Changes in Retained Earnings													
Operating Revenues	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	Jun	Year to Date
Gross Premiums	8,889,521	-	-	-	-	-	-	-	-	-	-	-	8,889,521
Premium Subsidized	(414,793)	-	-	-	-	-	-	-	-	-	-	-	(414,793)
Net Premium Revenues	8,474,728	-	-	-	-	-	-	-	-	-	-	-	8,474,728
Provider Contribution	2,478,376	-	-	-	-	-	-	-	-	-	-	-	2,478,376
Insurer Assessments	3,239,924	-	-	-	-	-	-	-	-	-	-	-	3,239,924
Total Operating Revenues	14,193,028	-	-	-	-	-	-	-	-	-	-	-	14,193,028
Operating Expenses													
Medical Losses:													
Losses Paid or Approved for Payment ⁽³⁾	8,968,093	-	-	-	-	-	-	-	-	-	-	-	8,968,093
Increase (Decrease) in Unpaid Losses	346,665	-	-	-	-	-	-	-	-	-	-	-	346,665
Deductible Subsidy Paid	48,493	-	-	-	-	-	-	-	-	-	-	-	48,493
Total Medical Losses	9,363,251	-	-	-	-	-	-	-	-	-	-	-	9,363,251
Pharmacy Losses:													
Losses Paid or Approved for Payment ⁽⁴⁾	3,648,421	-	-	-	-	-	-	-	-	-	-	-	3,648,421
Increase (Decrease) in Unpaid Losses	79,933	-	-	-	-	-	-	-	-	-	-	-	79,933
Drug Rebates	(230,293)	-	-	-	-	-	-	-	-	-	-	-	(230,293)
Subsidy - Coinsurance Out-of-Pocket Max	33,131	-	-	-	-	-	-	-	-	-	-	-	33,131
Total Pharmacy Losses	3,531,192	-	-	-	-	-	-	-	-	-	-	-	3,531,192
Total Losses	12,894,443	-	-	-	-	-	-	-	-	-	-	-	12,894,443
Loss adjustment expenses	-	-	-	-	-	-	-	-	-	-	-	-	-
Administrative expenses													
WPS Admin Fees	402,149	-	-	-	-	-	-	-	-	-	-	-	402,149
Navitus Admin Fees	107,223	-	-	-	-	-	-	-	-	-	-	-	107,223
DHFS Admin Fees	38,244	-	-	-	-	-	-	-	-	-	-	-	38,244
EDS Admin Fees	-	-	-	-	-	-	-	-	-	-	-	-	-
UGS Admin Fees	-	-	-	-	-	-	-	-	-	-	-	-	-
Milliman USA Actuarial Services	18,329	-	-	-	-	-	-	-	-	-	-	-	18,329
Other Admin Fees	-	-	-	-	-	-	-	-	-	-	-	-	-
Total Administrative Expenses	565,945	-	-	-	-	-	-	-	-	-	-	-	565,945
Referral fees	5,390	-	-	-	-	-	-	-	-	-	-	-	5,390
Total Operating Expenses	13,465,778	-	-	-	-	-	-	-	-	-	-	-	13,465,778
Net Operating Income (Loss)	727,250	-	-	-	-	-	-	-	-	-	-	-	727,250
Non-Operating Revenues (Expenses)													
Federal Grant	-	-	-	-	-	-	-	-	-	-	-	-	-
Investment income	122,541	-	-	-	-	-	-	-	-	-	-	-	122,541
Total Non-operating Revenues (Expenses)	122,541	-	-	-	-	-	-	-	-	-	-	-	122,541
Net Income (Loss)	849,791	-	-	-	-	-	-	-	-	-	-	-	849,791
Additions to Retained Earnings													
Policyholder													
Retained Earnings, Beginning of Period	9,542,625	-	-	-	-	-	-	-	-	-	-	-	9,542,625
Unfunded Policyholder Subsidies	-	-	-	-	-	-	-	-	-	-	-	-	-
Current Earnings	1,014,178	-	-	-	-	-	-	-	-	-	-	-	1,014,178
Retained Earnings, End of Period ⁽¹⁾	10,556,803	-	-	-	-	-	-	-	-	-	-	-	10,556,803
Providers													
Retained Earnings, Beginning of Period	(2,718,521)	-	-	-	-	-	-	-	-	-	-	-	(2,718,521)
Premium Subsidy Underpayment Adj.	-	-	-	-	-	-	-	-	-	-	-	-	-
Current Earnings	(422,156)	-	-	-	-	-	-	-	-	-	-	-	(422,156)
Retained Earnings, End of Period	(3,140,677)	-	-	-	-	-	-	-	-	-	-	-	(3,140,677)
Insurers													
Retained Earnings, Beginning of Period	3,677,147	-	-	-	-	-	-	-	-	-	-	-	3,677,147
Premium Subsidy Underpayment Adj.	-	-	-	-	-	-	-	-	-	-	-	-	-
Current Earnings	339,393	-	-	-	-	-	-	-	-	-	-	-	339,393
Retained Earnings, End of Period	4,016,540	-	-	-	-	-	-	-	-	-	-	-	4,016,540
Unfunded Deductible and Coinsurance Subsidy													
Retained Earnings, Beginning of Period	(1,100,223)	-	-	-	-	-	-	-	-	-	-	-	(1,100,223)
Current Earnings	(81,624)	-	-	-	-	-	-	-	-	-	-	-	(81,624)
Retained Earnings, End of Period	(1,181,847)	-	-	-	-	-	-	-	-	-	-	-	(1,181,847)
Total Retained Earnings	10,250,819	-	-	-	-	-	-	-	-	-	-	-	10,250,819

Due to the transition of HIRSP plan administrator services to a new contractor effective April 1, 2005 claims volumes and payments and other operational statistics will be different than previous months and should not be used for comparisons.

**WISCONSIN HEALTH INSURANCE RISK SHARING PLAN
2006 FISCAL YEAR DETAIL OF MISC REVENUE & ADMIN EXPENSES
AS OF JULY 2005**

MISC REVENUE	JUL 05	AUG	SEP	OCT	NOV	DEC	JAN	FEB	MAR	APR	MAY	JUN	YEAR TO DATE TOTAL
													-
													-
													-
													-
													-
													-
													-
TOTAL MISC REVENUE	-	-	-	-	-	-	-	-	-	-	-	-	-

MISC ADMIN EXP	JUL 05	AUG	SEP	OCT	NOV	DEC	JAN	FEB	MAR	APR	MAY	JUN	YEAR TO DATE TOTAL
													-
													-
													-
													-
													-
													-
													-
													-
													-
													-
													-
													-
													-
													-
TOTAL MISC ADMIN EXP	-	-	-	-	-	-	-	-	-	-	-	-	-

Due to the transition of HIRSP plan administrator services to a new contractor effective April 1, 2005 claims volumes and payments and other operational statistics will be different than previous months and should not be used for comparisons.

Wisconsin Health Insurance Risk Sharing Plan
Fiscal Year 2006 Interim Reconciliation
As Of July 31, 2005

	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	Jun	Year to Date
1. Operating and Administrative Costs under s.149.143(1)													
Medical Losses Paid or Approved for Payment	8,968,093	-	-	-	-	-	-	-	-	-	-	-	8,968,093
Increase (Decrease) in Unpaid Medical Losses	346,665	-	-	-	-	-	-	-	-	-	-	-	346,665
Pharmacy Losses Paid or Approved for Payment	3,648,421	-	-	-	-	-	-	-	-	-	-	-	3,648,421
Increase (Decrease) in Unpaid Pharmacy Losses	79,933	-	-	-	-	-	-	-	-	-	-	-	79,933
Drug Rebates	(230,293)	-	-	-	-	-	-	-	-	-	-	-	(230,293)
Total Administrative Expenses	571,335	-	-	-	-	-	-	-	-	-	-	-	571,335
Loss Adjustment Expense	-	-	-	-	-	-	-	-	-	-	-	-	-
Total Operating Expense	13,384,154	-	-	-	-	-	-	-	-	-	-	-	13,384,154
2. Adjustments to Operating and Administrative Costs													
Total Non-operating Revenue (Expense)	122,541	-	-	-	-	-	-	-	-	-	-	-	122,541
3. Total Fiscal Year Program Costs to be Split 60% 20% 20%	13,261,613	-	-	-	-	-	-	-	-	-	-	-	13,261,613
4. Year-to-Date Adjusted Program Costs Under s.149.143(1) (Excluding Subsidy Costs)													
Funding Shares													
60% Policyholders	7,956,967	-	-	-	-	-	-	-	-	-	-	-	7,956,967
20% Providers	2,652,323	-	-	-	-	-	-	-	-	-	-	-	2,652,323
20% Insurers	2,652,323	-	-	-	-	-	-	-	-	-	-	-	2,652,323
5. Subsidy Funding Shares													
Premium subsidies	414,793	-	-	-	-	-	-	-	-	-	-	-	414,793
Deductible Subsidies	48,493	-	-	-	-	-	-	-	-	-	-	-	48,493
Subsidy - coinsurance out-of-pocket Max	33,131	-	-	-	-	-	-	-	-	-	-	-	33,131
Total Subsidies	496,417	-	-	-	-	-	-	-	-	-	-	-	496,417
Subsidy Funding Needed by Source in addition to Section 3 Funding Shares													
Providers	248,209	-	-	-	-	-	-	-	-	-	-	-	248,209
Insurers	248,208	-	-	-	-	-	-	-	-	-	-	-	248,208
6. Year-to-Date Adjusted Program Costs Under s.149.143(1) (Including Subsidy Costs)													
Policyholders	7,956,967	-	-	-	-	-	-	-	-	-	-	-	7,956,967
Providers	2,900,532	-	-	-	-	-	-	-	-	-	-	-	2,900,532
Insurers	2,900,531	-	-	-	-	-	-	-	-	-	-	-	2,900,531
7. Non-GPR Revenues by Source Including GPR Subsidies Under s.20.435(4)(ah)													
Policyholders													
Premium	8,474,728	-	-	-	-	-	-	-	-	-	-	-	8,474,728
Premium and Deductible Subsidies Credited to Policyholders	496,417	-	-	-	-	-	-	-	-	-	-	-	496,417
Subtotal	8,971,145	-	-	-	-	-	-	-	-	-	-	-	8,971,145
Providers	2,478,376	-	-	-	-	-	-	-	-	-	-	-	2,478,376
Insurers	3,239,924	-	-	-	-	-	-	-	-	-	-	-	3,239,924
Total	14,689,445	-	-	-	-	-	-	-	-	-	-	-	14,689,445

Due to the transition of HIRSP plan administrator services to a new contractor effective April 1, 2005 claims volumes and payments and other operational statistics will be different than previous months and should not be used for comparisons.

8. Interim Estimate of Surplus/(Deficit) Account Balance for FY 2006

Policyholders

Prior Period Surplus / (Deficit)	9,542,625	-	-	-	-	-	-	-	-	-	-	-	9,542,625
Premium (Including Premium and Deductible Subsidies)	8,971,145	-	-	-	-	-	-	-	-	-	-	-	8,971,145
Less Cost	7,956,967	-	-	-	-	-	-	-	-	-	-	-	7,956,967
Less Unfunded Policyholder Subsidies	-	-	-	-	-	-	-	-	-	-	-	-	-
Monthly Change	1,014,178	-	-	-	-	-	-	-	-	-	-	-	1,014,178
Ending Surplus / (Deficit)	10,556,803	-	-	-	-	-	-	-	-	-	-	-	10,556,803
Assigned Surplus to SFY 2006	-	-	-	-	-	-	-	-	-	-	-	-	-
Unassigned Surplus	10,556,803	-	-	-	-	-	-	-	-	-	-	-	10,556,803

Providers

Prior Period Surplus / (Deficit)	(2,718,521)	-	-	-	-	-	-	-	-	-	-	-	(2,718,521)
Contribution	2,478,376	-	-	-	-	-	-	-	-	-	-	-	2,478,376
Less Cost	2,900,532	-	-	-	-	-	-	-	-	-	-	-	2,900,532
Premium Subsidy Underpayment Adj.	-	-	-	-	-	-	-	-	-	-	-	-	-
Monthly Change	(422,156)	-	-	-	-	-	-	-	-	-	-	-	(422,156)
Ending Surplus / (Deficit)	(3,140,677)	-	-	-	-	-	-	-	-	-	-	-	(3,140,677)

Insurers

Prior Period Surplus / (Deficit)	3,677,147	-	-	-	-	-	-	-	-	-	-	-	3,677,147
Assessment	3,239,924	-	-	-	-	-	-	-	-	-	-	-	3,239,924
Less Cost	2,900,531	-	-	-	-	-	-	-	-	-	-	-	2,900,531
Premium Subsidy Underpayment Adj.	-	-	-	-	-	-	-	-	-	-	-	-	-
Monthly Change	339,393	-	-	-	-	-	-	-	-	-	-	-	339,393
Ending Surplus / (Deficit)	4,016,540	-	-	-	-	-	-	-	-	-	-	-	4,016,540

Unfunded Deductible and Coinsurance Subsidy

Prior Period Surplus / (Deficit)	(1,100,223)	-	-	-	-	-	-	-	-	-	-	-	(1,100,223)
Monthly Change	(81,624)	-	-	-	-	-	-	-	-	-	-	-	(81,624)
Ending Surplus / (Deficit)	(1,181,847)	-	-	-	-	-	-	-	-	-	-	-	(1,181,847)

Total HIRSP Retained Earnings	10,250,819	-	-	-	-	-	-	-	-	-	-	-	10,250,819
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Due to the transition of HIRSP plan administrator services to a new contractor effective April 1, 2005 claims volumes and payments and other operational statistics will be different than previous months and should not be used for comparisons.

Wisconsin Health Insurance Risk Sharing Plan
July 31, 2005
Fiscal Year 2006

Unaudited Balance Sheet

Assets	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	Jun
Cash and Cash Equivalents	44,046,067	-	-	-	-	-	-	-	-	-	-	-
Other Receivables ⁽²⁾	629,508	-	-	-	-	-	-	-	-	-	-	-
Drug Rebates Receivable	1,816,840	-	-	-	-	-	-	-	-	-	-	-
Assessments Receivable	38,902,416	-	-	-	-	-	-	-	-	-	-	-
Prepaid Items	-	-	-	-	-	-	-	-	-	-	-	-
Total Assets	85,394,831	-	-	-	-	-	-	-	-	-	-	-
Liabilities and Fund Equity												
Liabilities:												
Unpaid Medical Loss Liabilities	20,350,824	-	-	-	-	-	-	-	-	-	-	-
Unpaid Prescription Drug Loss Liabilities	2,904,436	-	-	-	-	-	-	-	-	-	-	-
Unpaid Loss Adjustment Expense	660,000	-	-	-	-	-	-	-	-	-	-	-
Unearned Premiums	15,112,758	-	-	-	-	-	-	-	-	-	-	-
Unearned Assessments	35,639,168	-	-	-	-	-	-	-	-	-	-	-
Accounts Payable and Other Accrued Liabilities	476,826	-	-	-	-	-	-	-	-	-	-	-
Total Liabilities	75,144,012	-	-	-	-	-	-	-	-	-	-	-
Fund Equity:												
Policyholder	10,556,803	-	-	-	-	-	-	-	-	-	-	-
Providers	(3,140,677)	-	-	-	-	-	-	-	-	-	-	-
Insurers	4,016,540	-	-	-	-	-	-	-	-	-	-	-
Unfunded Deductible and Coinsurance Subsidy	(1,181,847)	-	-	-	-	-	-	-	-	-	-	-
Total Retained Earnings	10,250,819	-	-	-	-	-	-	-	-	-	-	-
Total Liabilities and Fund Equity	85,394,831	-	-	-	-	-	-	-	-	-	-	-

Due to the transition of HIRSP plan administrator services to a new contractor effective April 1, 2005 claims volumes and payments and other operational statistics will be different than previous months and should not be used for comparisons.

WISCONSIN HEALTH INSURANCE RISK SHARING PLAN
MONTHLY PROVIDER CONTRIBUTION REPORT
AS OF JULY 2005 MONTH END (7/27/2005)

Provider Share Calculation for the Current Month - Claims by Claim Type					
Regular Claims					
Claim Type	Billed Charges	U&C Percentage	Usual and Customary	Less HIRSP Allowed Charges	Provider Share
Professional	\$ 6,390,245.61	36.0%	\$ 4,092,952.31	\$ 2,718,394.31	\$ 1,374,558.00
Hospital Outpatient	\$ 2,936,788.57	27.5%	\$ 2,130,287.69	\$ 1,875,157.21	\$ 255,130.48
Hospital Inpatient	\$ 4,003,064.63	28.1%	\$ 2,877,803.16	\$ 2,192,278.69	\$ 685,524.47
Nursing Home	\$ 32,280.64	23.9%	\$ 24,572.02	\$ 28,374.32	\$ (3,802.30)
Other	\$ 557,227.82	23.9%	\$ 424,161.82	\$ 343,316.19	\$ 80,845.63
Total	\$ 13,919,607.27		\$ 9,549,777.01	\$ 7,157,520.72	\$ 2,392,256.29

Crossover Claims					
Claim Type	Medicare Allowed Charges	Medicare Paid	HIRSP Paid	HIRSP Deductible/ Coinsurance	Provider Share
Professional	\$ 569,248.04	\$ 404,845.76	\$ 128,757.13	\$ 27,720.99	\$ 7,924.16
Hospital Outpatient	\$ 482,146.48	\$ 353,809.32	\$ 113,864.90	\$ 12,366.94	\$ 2,105.32
Hospital Inpatient	\$ 481,439.31	\$ 414,308.14	\$ 72,041.48	\$ 1,322.22	\$ (6,232.53)
Nursing Home	\$ 51,293.16	\$ 39,324.49	\$ 11,727.57	\$ 599.00	\$ (357.90)
Other	\$ 178,646.45	\$ 130,030.22	\$ 41,745.30	\$ 6,022.88	\$ 848.05
Total	\$ 1,762,773.44	\$ 1,342,317.93	\$ 368,136.38	\$ 48,032.03	\$ 4,287.10

Provider Contribution on the Increase (Decrease) in Unpaid Losses	\$ 81,833.00
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Total Provider Contribution Non-Pharmacy	\$ 2,478,376.39
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Pharmacy Claims					
Claim Type	Billed Charges	U&C Percentage	Usual and Customary	Less HIRSP Allowed Charges	Provider Share
Prescription Drug not processed by PBM	\$ -	0.0%			\$ -
Prescription Drug processed by PBM	\$ 5,569,208.85	0.0%	\$ 4,049,636.67	\$ 4,049,636.67	\$ -
Total Provider Contribution Pharmacy	\$ 5,569,208.85		\$ 4,049,636.67	\$ 4,049,636.67	\$ -

Due to the transition of HIRSP plan administrator services to a new contractor effective April 1, 2005 claims volumes and payments and other operational statistics will be different than previous months and should not be used for comparisons.

**Wisconsin Health Insurance Risk Sharing Plan
for the Period Ended July 31, 2005
Calendar Year 2005**

Unaudited Statement of Revenues, Expenses, and Changes in Retained Earnings													
Operating Revenues	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Year to Date
Gross Premiums	8,239,786	8,033,854	8,203,838	8,038,869	7,720,822	8,114,062	8,889,521	-	-	-	-	-	57,240,752
Premium Subsidized	(354,700)	(328,871)	(306,815)	(348,067)	(353,231)	(352,175)	(414,793)	-	-	-	-	-	(2,458,652)
Net Premium Revenues	7,885,086	7,704,983	7,897,023	7,690,802	7,367,591	7,761,887	8,474,728	-	-	-	-	-	54,782,100
Provider Contribution	2,255,043	2,337,067	2,372,221	3,005,828	3,080,184	2,840,456	2,478,376	-	-	-	-	-	18,369,175
Insurer Assessments	2,716,349	2,716,349	2,716,349	2,716,349	2,716,349	2,716,349	3,239,924	-	-	-	-	-	19,538,018
Total Operating Revenues	12,856,478	12,758,399	12,985,593	13,412,979	13,164,124	13,318,692	14,193,028	-	-	-	-	-	92,689,293
Operating Expenses													
Medical Losses:													
Losses Paid or Approved for Payment ⁽³⁾	8,738,080	8,587,330	6,994,408	5,477,768	10,674,619	14,219,985	8,968,093	-	-	-	-	-	63,660,283
Increase (Decrease) in Unpaid Losses	(1,174,533)	(984,629)	2,012,472	4,796,581	(459,178)	(1,928,757)	346,665	-	-	-	-	-	2,608,621
Deductible Subsidy Paid	59,708	78,706	29,706	53,990	95,684	78,118	48,493	-	-	-	-	-	444,405
Total Medical Losses	7,623,255	7,681,407	9,036,586	10,328,339	10,311,125	12,369,346	9,363,251	-	-	-	-	-	66,713,309
Pharmacy Losses:													
Losses Paid or Approved for Payment	3,656,006	3,495,680	5,402,192	4,013,268	3,757,404	4,167,950	3,648,421	-	-	-	-	-	28,140,921
Increase (Decrease) in Unpaid Losses	(178,275)	116,814	(1,607,836)	139,289	154,789	34,714	79,933	-	-	-	-	-	(1,260,572)
Drug Rebates	(122,005)	(120,325)	(230,445)	(214,496)	(234,320)	(242,166)	(230,293)	-	-	-	-	-	(1,394,050)
Subsidy - Coinsurance Out-of-Pocket Max	12,515	12,515	(8,892)	12,663	22,609	30,369	33,131	-	-	-	-	-	114,910
Total Pharmacy Losses	3,368,241	3,504,684	3,555,019	3,950,724	3,700,482	3,990,867	3,531,192	-	-	-	-	-	25,601,209
Total Losses	10,991,496	11,186,091	12,591,605	14,279,063	14,011,607	16,360,213	12,894,443	-	-	-	-	-	92,314,518
Loss adjustment expenses	-	-	-	-	-	-	-	-	-	-	-	-	-
Administrative expenses													
WPS Admin Fees	-	-	-	380,950	390,487	593,501	402,149	-	-	-	-	-	1,767,087
Navitus Admin Fees	-	-	-	103,263	105,375	106,618	107,223	-	-	-	-	-	422,479
DHFS Admin Fees	23,186	37,147	50,352	18,876	50,258	80,383	38,244	-	-	-	-	-	298,446
EDS Admin Fees	76,867	75,812	74,950	(182)	6,974	-	-	-	-	-	-	-	234,421
UGS Admin Fees	239,028	241,709	244,304	-	12,500	250	-	-	-	-	-	-	737,791
Milliman USA Actuarial Services	22,888	54,942	25,797	35,041	29,084	19,242	18,329	-	-	-	-	-	205,323
Other Admin Fees	18,597	12,287	26,803	3,570	5,810	5,567	-	-	-	-	-	-	72,634
Total Administrative Expenses	380,566	421,897	422,206	541,518	600,488	805,561	565,945	-	-	-	-	-	3,738,181
Referral fees	7,035	4,607	7,455	9,380	4,725	(665)	5,390	-	-	-	-	-	37,927
Total Operating Expenses	11,379,097	11,612,595	13,021,266	14,829,961	14,616,820	17,165,109	13,465,778	-	-	-	-	-	96,090,626
Net Operating Income (Loss)	1,477,381	1,145,804	(35,673)	(1,416,982)	(1,452,696)	(3,846,417)	727,250	-	-	-	-	-	(3,401,333)
Non-Operating Revenues (Expenses)													
Federal Grant	-	-	-	-	-	-	-	-	-	-	-	-	-
Investment Income	79,968	67,563	92,323	118,962	125,449	104,607	122,541	-	-	-	-	-	711,413
Total Non-operating Revenues (Expenses)	79,968	67,563	92,323	118,962	125,449	104,607	122,541	-	-	-	-	-	711,413
Net Income (Loss)	1,557,349	1,213,367	56,650	(1,298,020)	(1,327,247)	(3,741,810)	849,791	-	-	-	-	-	(2,689,920)
Additions to Retained Earnings													
Policyholder													
Retained Earnings, Beginning of Period	9,648,674	11,224,539	12,477,327	12,957,102	12,276,016	11,491,285	9,542,625	-	-	-	-	-	9,648,674
Unfunded Policyholder Subsidies	-	-	-	-	-	-	-	-	-	-	-	-	-
Current Earnings	1,575,865	1,252,788	479,775	(681,086)	(784,731)	(1,948,660)	1,014,178	-	-	-	-	-	908,129
Retained Earnings, End of Period⁽¹⁾	11,224,539	12,477,327	12,957,102	12,276,016	11,491,285	9,542,625	10,556,803	-	-	-	-	-	10,556,803
Providers													
Retained Earnings, Beginning of Period	(1,036,887)	(1,240,687)	(1,404,428)	(1,777,648)	(1,908,049)	(1,938,243)	(2,718,521)	-	-	-	-	-	(1,036,887)
Premium Subsidy Underpayment Adj.	-	-	-	-	-	-	-	-	-	-	-	-	-
Current Earnings	(203,800)	(163,741)	(373,220)	(130,401)	(30,194)	(780,278)	(422,156)	-	-	-	-	-	(2,103,790)
Retained Earnings, End of Period	(1,240,687)	(1,404,428)	(1,777,648)	(1,908,049)	(1,938,243)	(2,718,521)	(3,140,677)	-	-	-	-	-	(3,140,677)
Insurers													
Retained Earnings, Beginning of Period	4,951,484	5,208,991	5,424,532	5,395,441	4,975,561	4,581,532	3,677,147	-	-	-	-	-	4,951,484
Premium Subsidy Underpayment Adj.	-	-	-	-	-	-	-	-	-	-	-	-	-
Current Earnings	257,507	215,541	(29,091)	(419,880)	(394,029)	(904,385)	339,393	-	-	-	-	-	(934,944)
Retained Earnings, End of Period	5,208,991	5,424,532	5,395,441	4,975,561	4,581,532	3,677,147	4,016,540	-	-	-	-	-	4,016,540
Unfunded Deductible and Coinsurance Subsidy													
Retained Earnings, Beginning of Period	(622,532)	(694,755)	(785,976)	(806,790)	(873,443)	(991,736)	(1,100,223)	-	-	-	-	-	(622,532)
Current Earnings	(72,223)	(91,221)	(20,814)	(66,653)	(118,293)	(108,487)	(81,624)	-	-	-	-	-	(559,315)
Retained Earnings, End of Period	(694,755)	(785,976)	(806,790)	(873,443)	(991,736)	(1,100,223)	(1,181,847)	-	-	-	-	-	(1,181,847)
Total Retained Earnings	14,498,088	15,711,455	15,768,105	14,470,085	13,142,838	9,401,028	10,250,819	-	-	-	-	-	10,250,819

Due to the transition of HIRSP plan administrator services to a new contractor effective April 1, 2005 claims volumes and payments and other operational statistics will be different than previous months and should not be used for comparisons.

WISCONSIN HEALTH INSURANCE RISK SHARING PLAN
2005 CALENDAR YEAR DETAIL OF MISC REVENUE & ADMIN EXPENSES
AS OF JULY 2005

MISC REVENUE	JAN 05	FEB	MAR	APR	MAY	JUN	JUL	AUG	SEP	OCT	NOV	DEC	YEAR TO DATE TOTAL
													-
													-
													-
													-
													-
													-
													-
TOTAL MISC REVENUE	-	-	-	-	-	-	-	-	-	-	-	-	-

MISC ADMIN EXP	JAN 05	FEB	MAR	APR	MAY	JUN	JUL	AUG	SEP	OCT	NOV	DEC	YEAR TO DATE TOTAL
Bank Service Charge													-
Postage	16,896.89	10,586.78	25,102.79										52,586.46
LAB Audit Fee	1,700.00	1,700.00	1,700.00	2,900.00	5,800.00								13,800.00
Speed Scribe													-
UW Extension													-
NASCHIP													-
Legal Services													-
Prest & Assoc-Ind Med Review													-
Independent Review				600.00									600.00
Premium Refund Overdraft Fees				70.00	10.00								80.00
Whyte Hirschboeck Dudek, SC						5,567.08							5,567.08
													-
													-
													-
													-
TOTAL MISC ADMIN EXP	18,596.89	12,286.78	26,802.79	3,570.00	5,810.00	5,567.08	-	-	-	-	-	-	72,633.54

Due to the transition of HIRSP plan administrator services to a new contractor effective April 1, 2005 claims volumes and payments and other operational statistics will be different than previous months and should not be used for comparisons.

**Wisconsin Health Insurance Risk Sharing Plan
Calendar Year 2005 Interim Reconciliation
As Of July 31, 2005**

	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Year to Date
1. Operating and Administrative Costs under s.149.143(1)													
Medical Losses Paid or Approved for Payment	8,738,080	8,587,330	6,994,408	5,477,768	10,674,619	14,219,985	8,968,093	-	-	-	-	-	63,660,283
Increase (Decrease) in Unpaid Medical Losses	(1,174,533)	(984,629)	2,012,472	4,796,581	(459,178)	(1,928,757)	346,665	-	-	-	-	-	2,608,621
Pharmacy Losses Paid or Approved for Payment	3,656,006	3,495,680	5,402,192	4,013,268	3,757,404	4,167,950	3,648,421	-	-	-	-	-	28,140,921
Increase (Decrease) in Unpaid Pharmacy Losses	(178,275)	116,814	(1,607,836)	139,289	154,789	34,714	79,933	-	-	-	-	-	(1,260,572)
Drug Rebates	(122,005)	(120,325)	(230,445)	(214,496)	(234,320)	(242,166)	(230,293)	-	-	-	-	-	(1,394,050)
Total Administrative Expenses	387,601	426,504	429,661	550,898	605,213	804,896	571,335	-	-	-	-	-	3,776,108
Loss Adjustment Expense	-	-	-	-	-	-	-	-	-	-	-	-	-
Total Operating Expense	11,306,874	11,521,374	13,000,452	14,763,308	14,498,527	17,056,622	13,384,154	-	-	-	-	-	95,531,311
2. Adjustments to Operating and Administrative Costs													
Total Non-operating Revenue (Expense)	79,968	67,563	92,323	118,962	125,449	104,607	122,541	-	-	-	-	-	711,413
3. Total Fiscal Year Program Costs to be Split 60% 20% 20%	11,226,906	11,453,811	12,908,129	14,644,346	14,373,078	16,952,015	13,261,613	-	-	-	-	-	94,819,898
4. Year-to-Date Adjusted Program Costs Under s.149.143(1) (Excluding Subsidy Costs)													
Funding Shares													
60% Policyholders	6,736,144	6,872,287	7,744,877	8,786,608	8,623,846	10,171,209	7,956,967	-	-	-	-	-	56,891,938
20% Providers	2,245,381	2,290,762	2,581,626	2,928,869	2,874,616	3,390,403	2,652,323	-	-	-	-	-	18,963,980
20% Insurers	2,245,381	2,290,762	2,581,626	2,928,869	2,874,616	3,390,403	2,652,323	-	-	-	-	-	18,963,980
5. Subsidy Funding Shares													
Premium subsidies	354,700	328,871	306,815	348,067	353,231	352,175	414,793	-	-	-	-	-	2,458,652
Deductible Subsidies	59,708	78,706	29,706	53,990	95,684	78,118	48,493	-	-	-	-	-	444,405
Subsidy - coinsurance out-of-pocket Max	12,515	12,515	(8,892)	12,663	22,609	30,369	33,131	-	-	-	-	-	114,910
Total Subsidies	426,923	420,092	327,629	414,720	471,524	460,662	496,417	-	-	-	-	-	3,017,967
Subsidy Funding Needed by Source in addition to Section 3 Funding Shares													
Providers	213,462	210,046	163,815	207,360	235,762	230,331	248,209	-	-	-	-	-	1,508,985
Insurers	213,461	210,046	163,814	207,360	235,762	230,331	248,208	-	-	-	-	-	1,508,982
6. Year-to-Date Adjusted Program Costs Under s.149.143(1) (Including Subsidy Costs)													
Policyholders	6,736,144	6,872,287	7,744,877	8,786,608	8,623,846	10,171,209	7,956,967	-	-	-	-	-	56,891,938
Providers	2,458,843	2,500,808	2,745,441	3,136,229	3,110,378	3,620,734	2,900,532	-	-	-	-	-	20,472,965
Insurers	2,458,842	2,500,808	2,745,440	3,136,229	3,110,378	3,620,734	2,900,531	-	-	-	-	-	20,472,962
7. Non-GPR Revenues by Source Including GPR Subsidies Under s.20.435(4)(ah)													
Policyholders													
Premium	7,885,086	7,704,983	7,897,023	7,690,802	7,367,591	7,761,887	8,474,728	-	-	-	-	-	54,782,100
Premium and Deductible Subsidies Credited to Policyholders	426,923	420,092	327,629	414,720	471,524	460,662	496,417	-	-	-	-	-	3,017,967
Subtotal	8,312,009	8,125,075	8,224,652	8,105,522	7,839,115	8,222,549	8,971,145	-	-	-	-	-	57,800,067
Providers	2,255,043	2,337,067	2,372,221	3,005,828	3,080,184	2,840,456	2,478,376	-	-	-	-	-	18,369,175
Insurers	2,716,349	2,716,349	2,716,349	2,716,349	2,716,349	2,716,349	3,239,924	-	-	-	-	-	19,538,018
Total	13,283,401	13,178,491	13,313,222	13,827,699	13,635,648	13,779,354	14,689,445	-	-	-	-	-	95,707,260

Due to the transition of HIRSP plan administrator services to a new contractor effective April 1, 2005 claims volumes and payments and other operational statistics will be different than previous months and should not be used for comparisons.

8. Interim Estimate of Surplus/(Deficit) Account Balance for FY 2005

Policyholders

Prior Period Surplus / (Deficit)	9,648,674	11,224,539	12,477,327	12,957,102	12,276,016	11,491,285	9,542,625	-	-	-	-	-	9,648,674
Premium (Including Premium and Deductible Subsidies)	8,312,009	8,125,075	8,224,652	8,105,522	7,839,115	8,222,549	8,971,145	-	-	-	-	-	57,800,067
Less Cost	6,736,144	6,872,287	7,744,877	8,786,608	8,623,846	10,171,209	7,956,967	-	-	-	-	-	56,891,938
Less Unfunded Policyholder Subsidies	-	-	-	-	-	-	-	-	-	-	-	-	-
Monthly Change	1,575,865	1,252,788	479,775	(681,086)	(784,731)	(1,948,660)	1,014,178	-	-	-	-	-	908,129
Ending Surplus / (Deficit)	11,224,539	12,477,327	12,957,102	12,276,016	11,491,285	9,542,625	10,556,803	-	-	-	-	-	10,556,803
Assigned Surplus to SFY 2005	-	-	-	-	-	-	-	-	-	-	-	-	-
Unassigned Surplus	11,224,539	12,477,327	12,957,102	12,276,016	11,491,285	9,542,625	10,556,803	-	-	-	-	-	10,556,803

Providers

Prior Period Surplus / (Deficit)	(1,036,887)	(1,240,687)	(1,404,428)	(1,777,648)	(1,908,049)	(1,938,243)	(2,718,521)	-	-	-	-	-	(1,036,887)
Contribution	2,255,043	2,337,067	2,372,221	3,005,828	3,080,184	2,840,456	2,478,376	-	-	-	-	-	18,369,175
Less Cost	2,458,843	2,500,808	2,745,441	3,136,229	3,110,378	3,620,734	2,900,532	-	-	-	-	-	20,472,965
Premium Subsidy Underpayment Adj.	-	-	-	-	-	-	-	-	-	-	-	-	-
Monthly Change	(203,800)	(163,741)	(373,220)	(130,401)	(30,194)	(780,278)	(422,156)	-	-	-	-	-	(2,103,790)
Ending Surplus / (Deficit)	(1,240,687)	(1,404,428)	(1,777,648)	(1,908,049)	(1,938,243)	(2,718,521)	(3,140,677)	-	-	-	-	-	(3,140,677)

Insurers

Prior Period Surplus / (Deficit)	4,951,484	5,208,991	5,424,532	5,395,441	4,975,561	4,581,532	3,677,147	-	-	-	-	-	4,951,484
Assessment	2,716,349	2,716,349	2,716,349	2,716,349	2,716,349	2,716,349	3,239,924	-	-	-	-	-	19,538,018
Less Cost	2,458,842	2,500,808	2,745,440	3,136,229	3,110,378	3,620,734	2,900,531	-	-	-	-	-	20,472,962
Premium Subsidy Underpayment Adj.	-	-	-	-	-	-	-	-	-	-	-	-	-
Monthly Change	257,507	215,541	(29,091)	(419,880)	(394,029)	(904,385)	339,393	-	-	-	-	-	(934,944)
Ending Surplus / (Deficit)	5,208,991	5,424,532	5,395,441	4,975,561	4,581,532	3,677,147	4,016,540	-	-	-	-	-	4,016,540

Unfunded Deductible and Coinsurance Subsidy

Prior Period Surplus / (Deficit)	(622,532)	(694,755)	(785,976)	(806,790)	(873,443)	(991,736)	(1,100,223)	-	-	-	-	-	(622,532)
Monthly Change	(72,223)	(91,221)	(20,814)	(66,653)	(118,293)	(108,487)	(81,624)	-	-	-	-	-	(559,315)
Ending Surplus / (Deficit)	(694,755)	(785,976)	(806,790)	(873,443)	(991,736)	(1,100,223)	(1,181,847)	-	-	-	-	-	(1,181,847)

Total HIRSP Retained Earnings	14,498,088	15,711,455	15,768,105	14,470,085	13,142,838	9,401,028	10,250,819	-	-	-	-	-	10,250,819
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Due to the transition of HIRSP plan administrator services to a new contractor effective April 1, 2005 claims volumes and payments and other operational statistics will be different than previous months and should not be used for comparisons.

Wisconsin Health Insurance Risk Sharing Plan
July 31, 2005
Calendar Year 2005

Unaudited Balance Sheet

Assets	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec
Cash and Cash Equivalents	43,348,568	47,057,865	53,789,890	57,009,607	48,034,750	47,991,033	44,046,067	-	-	-	-	-
Other Receivables ⁽²⁾	96,643	125,560	94,016	1,742,701	1,472,644	1,234,188	629,508	-	-	-	-	-
Drug Rebates Receivable	1,246,751	1,051,895	1,282,340	1,496,835	1,344,382	1,586,548	1,816,840	-	-	-	-	-
Assessments Receivable	3,357,262	94,485	217,131	97,932	85,013	85,013	38,902,416	-	-	-	-	-
Prepaid Items	52,878	42,291	17,188	1,280	-	-	-	-	-	-	-	-
Total Assets	48,102,102	48,372,096	55,400,565	60,348,355	50,936,789	50,896,782	85,394,831	-	-	-	-	-
Liabilities and Fund Equity	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec
Liabilities:												
Unpaid Medical loss Liabilities	17,498,548	16,751,485	18,285,381	21,908,176	21,560,577	20,085,992	20,350,824	-	-	-	-	-
Unpaid Prescription Drug Loss Liabilities	2,456,132	2,572,946	965,110	2,584,048	2,863,469	3,033,333	2,904,436	-	-	-	-	-
Unpaid Loss Adjustment Expense	660,000	660,000	660,000	660,000	660,000	660,000	660,000	-	-	-	-	-
Unearned Premiums	12,599,991	7,023,489	16,764,621	14,630,761	9,063,254	17,186,962	15,112,758	-	-	-	-	-
Unearned Assessments	2,260	5,010,790	2,537,883	5,432,699	2,716,349	-	35,639,168	-	-	-	-	-
Accounts Payable and Other Accrued Liabilities	387,083	641,931	419,465	662,586	930,302	529,467	476,826	-	-	-	-	-
Total Liabilities	33,604,014	32,660,641	39,632,460	45,878,270	37,793,951	41,495,754	75,144,012	-	-	-	-	-
Fund Equity:												
Policyholder	11,224,539	12,477,327	12,957,102	12,276,016	11,491,285	9,542,625	10,556,803	-	-	-	-	-
Providers	(1,240,687)	(1,404,428)	(1,777,648)	(1,908,049)	(1,938,243)	(2,718,521)	(3,140,677)	-	-	-	-	-
Insurers	5,208,991	5,424,532	5,395,441	4,975,561	4,581,532	3,677,147	4,016,540	-	-	-	-	-
Unfunded Deductible and Coinsurance Subsidy	(694,755)	(785,976)	(806,790)	(873,443)	(991,736)	(1,100,223)	(1,181,847)	-	-	-	-	-
Total Retained Earnings	14,498,088	15,711,455	15,768,105	14,470,085	13,142,838	9,401,028	10,250,819	-	-	-	-	-
Total Liabilities and Fund Equity	48,102,102	48,372,096	55,400,565	60,348,355	50,936,789	50,896,782	85,394,831	-	-	-	-	-

Due to the transition of HIRSP plan administrator services to a new contractor effective April 1, 2005 claims volumes and payments and other operational statistics will be different than previous months and should not be used for comparisons.

WISCONSIN HEALTH INSURANCE RISK SHARING PLAN

EARNED PREMIUM

FISCAL YEAR 2006

EARNED PREMIUM	
MONTH	FY 06
JUL	8,474,728
AUG	
SEP	
OCT	
NOV	
DEC	
JAN	
FEB	
MAR	
APR	
MAY	
JUN	
TOTAL	\$ 8,474,728

Due to the transition of HIRSP plan administrator services to a new contractor effective April 1, 2005 claims volumes and payments and other operational statistics will be different than previous months and should not be used for comparisons.

Wisconsin Health Insurance Risk Sharing Plan

Assessment Status

As of July 31, 2005

Prior Fiscal Assessments Receivable Balance: \$ 85,012.74

Fiscal Year 2006 Assessment Amount: \$ 38,879,092.52

Less: Payments Received

2005 07 (61,689.01)

Current Year Total \$ 38,817,403.51

Total Assessments Receivable Balance: \$ 38,902,416.25

Effective July 1, 2005, the assessment billing practice has changed to bill insurers for the full fiscal year assessment at the start of HIRSP's fiscal year. Insurers may elect to pay in full or multiple installments, as in years past. This schedule now reflects this billing change.

Due to the transition of HIRSP plan administrator services to a new contractor effective April 1, 2005 claims volumes and payments and other operational statistics will be different than previous months and should not be used for comparisons.

WISCONSIN HEALTH INSURANCE RISK SHARING PLAN

Monthly Applicant Activity For July 2005

Number of Applications Pending	June	320
Number of Applications Received	July	659
Number of Applications Rejected	July	125
Number of Applications Closed	July	50
Number of Applications Pending	July	346
Number of Applications Approved	July	458

Detail of Applications Rejected

Eligible for Group Health Coverage	3
Current Medicaid Coverage	0
Not a Wisconsin Resident	4
Did not Qualify for lost Employer Coverage	10
65 or Older	1
Previous HIRSP < 12 Months Ago	3
Currently Covered by Other Insurance	56
No Medical Reason	48
Insufficient Premium Submitted	0
Total	125

Detail of Applications Closed

Applicant Request	3
Proper Eligibility Requested, never received	16
Application Data Requested, never received	31
Total	50

Due to a programming error, the pending application numbers in this report are overstated.

WISCONSIN HEALTH INSURANCE RISK SHARING PLAN

Monthly Applicant Activity

July, 2005

A.	Medicare Eligible	6
B.	HIV +	4
C.	Eligible Individual	190
D.	Letter of Medical Eligibility	258
1.	Letter of Rejection By:	
	American Family	18
	American Medical Security Group	9
	American Republic	7
	Atrium Health Plan	1
	Blue Cross & Blue Shield United of Wisconsin	48
	Celtic Life Insurance Company	2
	Continental General Insurance Company	1
	Empire Fire and Marine Insurance Company	1
	Fortis Benefits Insurance	33
	Golden Rule Insurance Company	29
	Humana Insurance Company	31
	Insurers Administrative Corporation	2
	John Alden Life Insurance	3
	Mega Life and Health Insurance	18
	Mid-West National Life Insurance Company of	1
	Midwest Security Life Insurance	2
	Pekin Life Insurance	6
	Security Health Plan	7
	Trustmark	1
	Unity Health Plan	2
	Wisconsin Physicians Service Insurance	27
2.	Notice of Benefit Reduction	8
3.	Notice of Premium increase due to a Health Reason	1
Total		458

Due to the transition of HIRSP plan administrator services to a new contractor effective April 1, 2005 claims volumes and payments and other operational statistics will be different than previous months and should not be used for comparisons.

WISCONSIN HEALTH INSURANCE RISK SHARING PLAN

Restated Monthly Enrollment Through July 2005 Month End

	Total Subsidy				Total Non-Subsidy					Combined Total			
	Plan 1A	Plan 2	Total		Plan 1A	Plan 1B	Plan 2	Total		Plan 1A	Plan 1B	Plan 2	Total
August 2004	2,981	743	3,724		5,247	8,432	989	14,668		8,228	8,432	1,732	18,392
September 2004	2,988	748	3,736		5,241	8,504	984	14,729		8,229	8,504	1,732	18,465
October 2004	3,001	762	3,763		5,120	8,475	960	14,555		8,121	8,475	1,722	18,318
November 2004	2,989	765	3,754		5,141	8,511	964	14,616		8,130	8,511	1,729	18,370
December 2004	3,008	762	3,770		5,147	8,588	958	14,693		8,155	8,588	1,720	18,463
January 2005	2,960	744	3,704		4,713	9,139	955	14,807		7,673	9,139	1,699	18,511
February 2005	2,956	742	3,698		4,757	9,231	962	14,950		7,713	9,231	1,704	18,648
March 2005	2,969	741	3,710		4,833	9,372	961	15,166		7,802	9,372	1,702	18,876
April 2005	2,957	744	3,701		4,849	9,407	964	15,220		7,806	9,407	1,708	18,921
May 2005	2,970	738	3,708		4,924	9,537	964	15,425		7,894	9,537	1,702	19,133
June 2005	2,999	736	3,735		5,000	9,707	974	15,681		7,999	9,707	1,710	19,416
July 2005	2,760	710	3,470		5,217	9,784	1,024	16,025		7,977	9,784	1,734	19,495

Detail of Total Subsidy Policies in Force as of July Month End

	Level 0	Level 1	Level 2	Level 3	Level 4	Level 5	Total
August 2004	14,668	547	552	665	1,391	569	18,392
September 2004	14,729	551	554	667	1,396	568	18,465
October 2004	14,555	553	546	677	1,424	563	18,318
November 2004	14,616	553	539	679	1,428	555	18,370
December 2004	14,693	554	541	686	1,432	557	18,463
January 2005	14,807	529	526	676	1,451	522	18,511
February 2005	14,950	520	523	678	1,461	516	18,648
March 2005	15,166	521	523	682	1,471	513	18,876
April 2005	15,220	516	518	688	1,476	503	18,921
May 2005	15,425	520	515	689	1,483	501	19,133
June 2005	15,681	521	520	696	1,494	504	19,416
July 2005	16,025	440	483	668	1,375	504	19,495

Level 0 = Income > \$25,000

Level 1 = Income \$17,000-\$19,999

Level 2 = Income \$14,000-\$16,999

Level 3 = Income \$10,000-\$13,999

Level 4 = Income < or equal to \$9,999

Level 5 = Income \$20,000-\$24,999

*** Please note: The method of counting enrollment numbers for this report was changed for the April 2005 report and going forward. The counts are now being counted on a prorated basis using actual days covered.**

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WISCONSIN HEALTH INSURANCE RISK SHARING PLAN

Total Policies in Force by Plan, Gender and Age Group as of July 2005 Month End

Male

Plan	Gender	Age Group	Number of Policyholders
1A	Male	0-24	463
1A	Male	25-29	236
1A	Male	30-34	186
1A	Male	35-39	269
1A	Male	40-44	422
1A	Male	45-49	496
1A	Male	50-54	550
1A	Male	55-59	482
1A	Male	60-64	453
1A	Male	65+	7
Total			3,564

Female

Plan	Gender	Age Group	Number of Policyholders
1A	Female	0-24	426
1A	Female	25-29	222
1A	Female	30-34	219
1A	Female	35-39	250
1A	Female	40-44	346
1A	Female	45-49	473
1A	Female	50-54	613
1A	Female	55-59	800
1A	Female	60-64	1,034
1A	Female	65+	30
Total			4,413

Plan	Gender	Age Group	Number of Policyholders
1B	Male	0-24	296
1B	Male	25-29	67
1B	Male	30-34	81
1B	Male	35-39	166
1B	Male	40-44	309
1B	Male	45-49	494
1B	Male	50-54	691
1B	Male	55-59	906
1B	Male	60-64	1,375
1B	Male	65+	24
Total			4,409

Plan	Gender	Age Group	Number of Policyholders
1B	Female	0-24	196
1B	Female	25-29	64
1B	Female	30-34	75
1B	Female	35-39	167
1B	Female	40-44	302
1B	Female	45-49	512
1B	Female	50-54	740
1B	Female	55-59	1,234
1B	Female	60-64	2,050
1B	Female	65+	35
Total			5,375

Plan	Gender	Age Group	Number of Policyholders
2	Male	0-24	3
2	Male	25-29	12
2	Male	30-34	15
2	Male	35-39	35
2	Male	40-44	81
2	Male	45-49	111
2	Male	50-54	129
2	Male	55-59	115
2	Male	60-64	94
2	Male	65+	138
Total			733

Plan	Gender	Age Group	Number of Policyholders
2	Female	0-24	3
2	Female	25-29	4
2	Female	30-34	16
2	Female	35-39	27
2	Female	40-44	66
2	Female	45-49	100
2	Female	50-54	129
2	Female	55-59	163
2	Female	60-64	180
2	Female	65+	313
Total			1,001

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WISCONSIN HEALTH INSURANCE RISK SHARING PLAN

Total Policies in Force by Plan, Gender, Zone and Age Group as of July 2005 Month End

Male

Plan	Zone	Gender	Age Group	Number of Policyholders
1A	1	Male	0-24	28
1A	1	Male	25-29	24
1A	1	Male	30-34	18
1A	1	Male	35-39	36
1A	1	Male	40-44	47
1A	1	Male	45-49	45
1A	1	Male	50-54	47
1A	1	Male	55-59	36
1A	1	Male	60-64	32
1A	1	Male	65+	0
			Total	313

Female

Plan	Zone	Gender	Age Group	Number of Policyholders
1A	1	Female	0-24	32
1A	1	Female	25-29	29
1A	1	Female	30-34	20
1A	1	Female	35-39	17
1A	1	Female	40-44	30
1A	1	Female	45-49	34
1A	1	Female	50-54	52
1A	1	Female	55-59	75
1A	1	Female	60-64	76
1A	1	Female	65+	2
			Total	367

Plan	Zone	Gender	Age Group	Number of Policyholders
1A	2	Male	0-24	148
1A	2	Male	25-29	77
1A	2	Male	30-34	65
1A	2	Male	35-39	81
1A	2	Male	40-44	123
1A	2	Male	45-49	135
1A	2	Male	50-54	149
1A	2	Male	55-59	133
1A	2	Male	60-64	115
1A	2	Male	65+	2
			Total	1,028

Plan	Zone	Gender	Age Group	Number of Policyholders
1A	2	Female	0-24	149
1A	2	Female	25-29	62
1A	2	Female	30-34	74
1A	2	Female	35-39	83
1A	2	Female	40-44	113
1A	2	Female	45-49	140
1A	2	Female	50-54	176
1A	2	Female	55-59	208
1A	2	Female	60-64	298
1A	2	Female	65+	8
			Total	1,311

Plan	Zone	Gender	Age Group	Number of Policyholders
1A	3	Male	0-24	287
1A	3	Male	25-29	135
1A	3	Male	30-34	103
1A	3	Male	35-39	152
1A	3	Male	40-44	252
1A	3	Male	45-49	316
1A	3	Male	50-54	354
1A	3	Male	55-59	313
1A	3	Male	60-64	306
1A	3	Male	65+	5
			Total	2,223

Plan	Zone	Gender	Age Group	Number of Policyholders
1A	3	Female	0-24	245
1A	3	Female	25-29	131
1A	3	Female	30-34	125
1A	3	Female	35-39	150
1A	3	Female	40-44	203
1A	3	Female	45-49	299
1A	3	Female	50-54	385
1A	3	Female	55-59	517
1A	3	Female	60-64	660
1A	3	Female	65+	20
			Total	2,735

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WISCONSIN HEALTH INSURANCE RISK SHARING PLAN

Total Policies in Force by Plan, Gender, Zone and Age Group as of July 2005 Month End

Male

Plan	Zone	Gender	Age Group	Number of Policyholders
1B	1	Male	0-24	15
1B	1	Male	25-29	6
1B	1	Male	30-34	10
1B	1	Male	35-39	20
1B	1	Male	40-44	27
1B	1	Male	45-49	32
1B	1	Male	50-54	42
1B	1	Male	55-59	61
1B	1	Male	60-64	80
1B	1	Male	65+	4
Total				297

Female

Plan	Zone	Gender	Age Group	Number of Policyholders
1B	1	Female	0-24	15
1B	1	Female	25-29	8
1B	1	Female	30-34	9
1B	1	Female	35-39	5
1B	1	Female	40-44	20
1B	1	Female	45-49	32
1B	1	Female	50-54	39
1B	1	Female	55-59	76
1B	1	Female	60-64	130
1B	1	Female	65+	1
Total				335

Plan	Zone	Gender	Age Group	Number of Policyholders
1B	2	Male	0-24	92
1B	2	Male	25-29	16
1B	2	Male	30-34	29
1B	2	Male	35-39	52
1B	2	Male	40-44	95
1B	2	Male	45-49	139
1B	2	Male	50-54	220
1B	2	Male	55-59	233
1B	2	Male	60-64	373
1B	2	Male	65+	2
Total				1,251

Plan	Zone	Gender	Age Group	Number of Policyholders
1B	2	Female	0-24	68
1B	2	Female	25-29	17
1B	2	Female	30-34	25
1B	2	Female	35-39	64
1B	2	Female	40-44	89
1B	2	Female	45-49	166
1B	2	Female	50-54	237
1B	2	Female	55-59	383
1B	2	Female	60-64	582
1B	2	Female	65+	9
Total				1,640

Plan	Zone	Gender	Age Group	Number of Policyholders
1B	3	Male	0-24	189
1B	3	Male	25-29	45
1B	3	Male	30-34	42
1B	3	Male	35-39	94
1B	3	Male	40-44	187
1B	3	Male	45-49	323
1B	3	Male	50-54	429
1B	3	Male	55-59	612
1B	3	Male	60-64	922
1B	3	Male	65+	18
Total				2,861

Plan	Zone	Gender	Age Group	Number of Policyholders
1B	3	Female	0-24	113
1B	3	Female	25-29	39
1B	3	Female	30-34	41
1B	3	Female	35-39	98
1B	3	Female	40-44	193
1B	3	Female	45-49	314
1B	3	Female	50-54	464
1B	3	Female	55-59	775
1B	3	Female	60-64	1,338
1B	3	Female	65+	25
Total				3,400

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WISCONSIN HEALTH INSURANCE RISK SHARING PLAN

Total Policies in Force by Plan, Gender, Zone and Age Group as of July 2005 Month End

Male

Plan	Zone	Gender	Age Group	Number of Policyholders
2	1	Male	0-24	0
2	1	Male	25-29	1
2	1	Male	30-34	4
2	1	Male	35-39	9
2	1	Male	40-44	11
2	1	Male	45-49	17
2	1	Male	50-54	17
2	1	Male	55-59	15
2	1	Male	60-64	11
2	1	Male	65+	7
Total				92

Female

Plan	Zone	Gender	Age Group	Number of Policyholders
2	1	Female	0-24	1
2	1	Female	25-29	0
2	1	Female	30-34	3
2	1	Female	35-39	2
2	1	Female	40-44	8
2	1	Female	45-49	11
2	1	Female	50-54	18
2	1	Female	55-59	14
2	1	Female	60-64	11
2	1	Female	65+	26
Total				94

Plan	Zone	Gender	Age Group	Number of Policyholders
2	2	Male	0-24	1
2	2	Male	25-29	4
2	2	Male	30-34	6
2	2	Male	35-39	10
2	2	Male	40-44	23
2	2	Male	45-49	35
2	2	Male	50-54	40
2	2	Male	55-59	22
2	2	Male	60-64	30
2	2	Male	65+	45
Total				216

Plan	Zone	Gender	Age Group	Number of Policyholders
2	2	Female	0-24	0
2	2	Female	25-29	1
2	2	Female	30-34	6
2	2	Female	35-39	10
2	2	Female	40-44	23
2	2	Female	45-49	29
2	2	Female	50-54	37
2	2	Female	55-59	52
2	2	Female	60-64	49
2	2	Female	65+	96
Total				303

Plan	Zone	Gender	Age Group	Number of Policyholders
2	3	Male	0-24	2
2	3	Male	25-29	7
2	3	Male	30-34	5
2	3	Male	35-39	16
2	3	Male	40-44	47
2	3	Male	45-49	59
2	3	Male	50-54	72
2	3	Male	55-59	78
2	3	Male	60-64	53
2	3	Male	65+	86
Total				425

Plan	Zone	Gender	Age Group	Number of Policyholders
2	3	Female	0-24	2
2	3	Female	25-29	3
2	3	Female	30-34	7
2	3	Female	35-39	15
2	3	Female	40-44	35
2	3	Female	45-49	60
2	3	Female	50-54	74
2	3	Female	55-59	97
2	3	Female	60-64	120
2	3	Female	65+	191
Total				604

*** Please note: The method of counting enrollment numbers for this report was changed for the April 2005 report and going forward. The counts are now being counted on a prorated basis using actual days covered.**

Due to the transition of HIRSP plan administrator services to a new contractor effective April 1, 2005 claims volumes and payments and other operational statistics will be different than previous months and should not be used for comparisons.

WISCONSIN HEALTH INSURANCE RISK SHARING PLAN

Total Subsidy/Non-Subsidy Restated for July 2005 Month End

Plan		Number of Policyholders
1A	Non-subsidized	5,217
1A	Subsidized	2,760
1B	Non-subsidized	9,784
2	Non-subsidized	1,024
2	Subsidized	710
Total		19,495

Total Subsidy by Level

Subsidy Level	Number of Policyholders
Level 0	16,025
Level 1	440
Level 2	483
Level 3	668
Level 4	1,375
Level 5	504
Total	19,495

	Number of Policyholders
Plan 1A, Zone 1, Non-Subsidized	393
Plan 1A, Zone 1, Subsidized	287
Plan 1A, Zone 2, Non-Subsidized	1,574
Plan 1A, Zone 2, Subsidized	765
Plan 1A, Zone 3, Non-Subsidized	3,250
Plan 1A, Zone 3, Subsidized	1,708
Plan 1B, Zone 1, Non-Subsidized	632
Plan 1B, Zone 2, Non-Subsidized	2,891
Plan 1B, Zone 3, Non-Subsidized	6,261
Plan 2, Zone 1, Non-Subsidized	94
Plan 2, Zone 1, Subsidized	92
Plan 2, Zone 2, Non-Subsidized	314
Plan 2, Zone 2, Subsidized	205
Plan 2, Zone 3, Non-Subsidized	616
Plan 2, Zone 3, Subsidized	413
Total	19,495

*** Please note: The method of counting enrollment numbers for this report was changed for the April 2005 report and going forward. The counts are now being counted on a prorated basis using actual days covered.**

Due to the transition of HIRSP plan administrator services to a new contractor effective April 1, 2005 claims volumes and payments and other operational statistics will be different than previous months and should not be used for comparisons.

Wisconsin Health Insurance Risk Sharing Plan

Monthly Service Report

For: July, 2005

Customer Service/Policyholder Services

Week Ending	Calls Offered	Calls Handled	# Abandoned	% Abandoned	Average Wait (ASA)*	Longest Wait	Average Talk	Service Level**
7/1/2005	3,741	3,669	72	1.90%	00:00:58	00:10:21	00:03:37	88.10%
7/8/2005	2,566	2,548	18	0.70%	00:00:19	00:04:40	00:04:21	88.10%
7/15/2005	3,135	3,089	46	1.50%	00:00:27	00:05:05	00:04:07	93.00%
7/22/2005	2,933	2,904	29	1.00%	00:00:25	00:05:10	00:04:01	94.60%
7/29/2005	3,125	3,078	47	1.50%	00:00:28	00:07:50	00:03:57	93.10%

Historical

03-2004	11,213	9,694	1,519	13.5 %	00:05:02	00:13:04	00:03:06	
04-2004	13,716	12,529	1,187	8.7 %	00:03:34	00:11:04	00:02:52	
05-2004	9,600	8,908	692	7.2 %	00:02:58	00:11:22	00:03:11	
06-2004	10,572	9,360	1,212	11.5 %	00:04:36	00:12:11	00:03:20	
07-2004	11,453	10,865	588	4.9 %	00:02:47	00:08:34	00:02:53	
01-2005	10,390	9,357	1,015	9.6 %	00:04:09	00:11:24	00:03:35	
02-2005	10,618	9,625	933	8.8 %	00:03:40	00:12:35	00:03:29	
03-2005	13,363	11,782	1,561	11.5 %	00:04:34	00:18:00	00:03:30	
04-2005	18,245	17,962	283	1.6 %	00:00:30	00:09:35	00:03:38	93.00%
05-2005	17,638	17,311	327	1.9 %	00:00:39	00:12:39	00:03:39	89.00%
06-2005	18,966	18,309	657	3.5 %	00:00:57	00:12:07	00:03:48	81.00%
07-2005	12,293	12,150	143	1.2 %	00:00:25	00:07:50	00:04:07	94.00%

Medical Affairs Telephone

7/1/2005	173	169	4	2.30%	00:00:27	00:02:44	00:03:18	95.40%
7/8/2005	116	114	2	1.70%	00:00:45	00:04:53	00:02:54	92.20%
7/15/2005	212	208	4	1.90%	00:00:30	00:04:15	00:02:54	91.50%
7/22/2005	168	165	3	1.80%	00:00:24	00:03:54	00:02:59	94.60%
7/29/2005	185	182	3	1.60%	00:00:31	00:03:58	00:03:13	94.10%

PBM Telephone Results

7/1/2005	336	335	0	0.00%	00:00:01	00:00:18		98.30%
7/8/2005	287	287	0	0.00%	00:00:00	00:01:30		98.30%
7/15/2005	351	351	0	0.00%	00:00:01	00:01:00		99.20%
7/22/2005	342	340	1	0.60%	00:00:02	00:01:05		98.20%
7/29/2005	368	367	0	0.00%	00:00:01	00:00:27		100.00%

All Time Formats are hh:mm:ss Historical Stats prior to April 1, 2005 have all been converted to the new format.

* ASA = Average Speed of Answer

** Service Level = Calls handled within 120 seconds divided by the number of calls offered.

*** Monthly totals are based on actual month end which is the last day of the month.

Most Commonly Asked Questions to Customer Service/ Policyholder Services

- What is the status of my claim?
- What is the status of my application?
- What is my premium?

Open Written Correspondence

Department	Beginning Inventory	Received	Completed	1 to 2 Days	3 to 5 Days	6+ Days	Ending Inventory
CUSTOMER SERVICE	25	170	185	0	6	4	10
MEDICAL AFFAIRS	0	2	2	0	0	0	0
POLICYHOLDER SERVICES*	1	63	62	0	2	0	2

* Supplemental application documentation is no longer counted as open written correspondence.

First Call Resolution

Number of Calls Handled	First Call Resolved	Percent of Calls
9,864	9,184	93.11%

Telephone and Written

Number of Days	Number of Inquires	Number Closed	Percentage
5	2530	2460	97.23%
2	2530	2386	94.31%

Due to the transition of HIRSP plan administrator services to a new contractor effective April 1, 2005 claims volumes and payments and other operational statistics will be different than previous months and should not be used for comparisons.

WISCONSIN HEALTH INSURANCE RISK SHARING PLAN
CLAIMS THAT HAVE FINALIZED TO PAYMENT OR DENIAL AS OF JULY 2005 MONTH END (7/27/2005)

	Jul 2004*	Aug 2004*	Sep 2004*	Oct 2004*	Nov 2004*	Dec 2004*	Jan 2005*	Feb 2005*	Mar 2005*	Apr 2005**	May 2005**	June 2005**	July 2005**
	# of Claims	# of Claims	# of Claims	# of Claims	# of Claims	# of Claims	# of Claims	# of Claims	# of Claims	# of Claims	# of Claims	# of Claims	# of Claims
Plan 1A													
Pharmacy										23,720	27,571	28,761	27,037
Inpatient Hospital										71	216	379	228
Inpatient Hospital Crossovers										2	5	3	2
Outpatient Hospital										2,240	2,532	2,762	1,980
Outpatient Hospital Crossovers										21	43	23	16
Professional										8,566	16,271	15,154	11,676
Professional Crossovers										31	115	100	161
Nursing Home										13	26	44	13
Nursing Home Crossovers										0	0	0	0
Miscellaneous										1,070	3,032	2,826	1,778
Miscellaneous Crossovers										4	6	8	46
Total Plan 1A										35,738	49,817	50,060	42,937
Plan 1B													
Pharmacy										20,059	23,142	24,564	23,494
Inpatient Hospital										66	169	221	143
Inpatient Hospital Crossovers										1	3	2	2
Outpatient Hospital										1,698	1,903	2,174	1,519
Outpatient Hospital Crossovers										11	24	34	9
Professional										6,617	13,114	12,397	9,421
Professional Crossovers										63	55	87	67
Nursing Home										1	11	2	6
Nursing Home Crossovers										0	0	0	0
Miscellaneous										717	1,781	1,629	1,112
Miscellaneous Crossovers										1	15	15	6
Total Plan 1B										29,234	40,217	41,125	35,779
Plan 2													
Pharmacy										12,083	13,905	14,360	13,737
Inpatient Hospital										4	10	17	11
Inpatient Hospital Crossovers										52	103	94	62
Outpatient Hospital										155	186	141	149
Outpatient Hospital Crossovers										771	1,233	1,236	891
Professional										311	525	384	416
Professional Crossovers										3,133	6,487	5,978	5,530
Nursing Home										6	6	8	5
Nursing Home Crossovers										5	18	37	14
Miscellaneous										252	358	344	278
Miscellaneous Crossovers										622	1,315	1,417	1,033
Total Plan 2										17,394	24,146	24,016	22,126
Total													
Pharmacy	59,962	60,942	60,172	61,367	92,799	63,286	63,621	62,372	61,359	55,862	64,618	67,685	64,268
Inpatient Hospital	377	474	383	268	612	439	540	422	462	141	395	617	382
Inpatient Hospital Crossovers	65	99	71	42	99	75	71	73	96	55	111	99	66
Outpatient Hospital	4,083	4,953	3,962	3,571	5,386	4,145	5,705	4,027	4,448	4,093	4,621	5,077	3,648
Outpatient Hospital Crossovers	1,325	1,216	935	770	1,199	975	1,598	1,015	1,211	803	1,300	1,293	916
Professional	26,837	26,033	20,637	22,116	30,612	24,387	32,229	24,762	26,193	15,494	29,910	27,935	21,513
Professional Crossovers	4,465	5,037	3,434	3,675	5,294	3,918	6,286	4,251	4,592	3,227	6,657	6,165	5,758
Nursing Home	35	18	11	16	34	18	14	31	26	20	43	54	24
Nursing Home Crossovers	7	19	14	11	36	11	11	6	4	5	18	37	14
Miscellaneous	1,835	2,278	1,823	1,286	2,120	1,921	2,405	1,817	1,842	2,039	5,171	4,799	3,168
Miscellaneous Crossovers	0	0	0	0	0	0	0	0	0	627	1,336	1,440	1,085
Total	98,991	101,069	91,442	93,122	138,191	99,175	112,480	98,776	100,233	82,366	114,180	115,201	100,842

* The reporting of claims numbers before April 2005 did not include information by Plan. Previously stated numbers are now reported only in the Total section of this report.

** Claim adjustments have been reported in the non-Crossover categories on history prior to April 2005. Claim adjustments are not included in any category beginning with April 2005.

***Starting this month the total number of claims in this report does not balance to the total number of claims reported in the Paid and Denied (non-pharmacy) report because a claim that has both a paid line and a denied line is counted only once in this report. It is counted once as a paid claim and once as a denied claim in the Paid and Denied (non-pharmacy) Report.

Due to the transition of HIRSP plan administrator services to a new contractor effective April 1, 2005 claims volumes and payments and other operational statistics will be different than previous months and should not be used for comparisons.

WISCONSIN HEALTH INSURANCE RISK SHARING PLAN

AVERAGE CLAIMS PROCESSING DAYS AS OF JULY 2005 MONTH END (7/27/2005)

	Jul 2004*	Aug 2004*	Sep 2004*	Oct 2004*	Nov 2004*	Dec 2004*	Jan 2005*	Feb 2005*	Mar 2005*	Apr 2005**	May 2005**	June 2005**	July 2005**
	Ave # Days	Ave # Days	Ave # Days	Ave # Days	Ave # Days	Ave # Days	Ave # Days	Ave # Days	Ave # Days	Ave # Days	Ave # Days	Ave # Days	Ave # Days
Plan 1A													
Inpatient Hospital										30.04	32.29	26.42	23.66
Inpatient Hospital Crossovers										37.00	23.25	21.66	24.00
Outpatient Hospital										11.96	10.73	8.44	7.28
Outpatient Hospital Crossovers										25.00	23.45	24.68	16.35
Professional										20.39	16.04	10.11	9.65
Professional Crossovers										23.86	18.75	14.14	12.20
Nursing Home										13.88	27.53	14.52	27.28
Nursing Home Crossovers										0.00	0.00	0.00	0.00
Miscellaneous										23.20	21.24	17.48	17.06
Miscellaneous Crossovers										36.75	24.60	29.00	22.33
Average for the Month for Plan 1A										19.09	16.19	11.02	10.33
Plan 1B													
Inpatient Hospital										27.56	29.74	27.46	25.59
Inpatient Hospital Crossovers										35.00	19.66	16.00	18.00
Outpatient Hospital										12.69	10.35	8.46	8.28
Outpatient Hospital Crossovers										27.63	21.20	24.16	19.14
Professional										20.50	15.15	9.72	8.99
Professional Crossovers										22.80	22.86	14.83	11.94
Nursing Home										16.00	37.66	15.00	11.50
Nursing Home Crossovers										0.00	0.00	0.00	0.00
Miscellaneous										23.74	20.84	17.49	18.25
Miscellaneous Crossovers										11.00	23.81	14.35	18.00
Average for the Month for Plan 1B										19.33	15.29	10.42	9.78
Plan 2													
Inpatient Hospital										24.00	68.37	21.77	18.75
Inpatient Hospital Crossovers										29.38	19.32	19.72	22.69
Outpatient Hospital										19.54	20.59	16.63	21.66
Outpatient Hospital Crossovers										25.07	16.97	17.06	17.53
Professional										25.29	23.62	21.91	22.17
Professional Crossovers										23.33	15.34	13.11	13.54
Nursing Home										21.33	18.80	18.50	0.00
Nursing Home Crossovers										22.60	14.33	19.00	24.66
Miscellaneous										19.19	21.65	18.97	21.14
Miscellaneous Crossovers										26.35	19.21	18.73	18.37
Average for the Month for Plan 2										23.91	16.77	14.99	15.19
Total													
Inpatient Hospital	15.00	15.00	17.00	21.00	18.00	17.00	15.00	17.00	15.00	28.58	32.01	26.68	24.22
Inpatient Hospital Crossovers	9.00	11.00	15.00	15.00	16.00	13.00	12.00	14.00	10.00	29.75	19.48	19.70	22.55
Outpatient Hospital	10.00	11.00	14.00	14.00	13.00	13.00	11.00	12.00	12.00	12.45	10.86	8.63	8.08
Outpatient Hospital Crossovers	13.00	15.00	19.00	21.00	22.00	25.00	19.00	19.00	16.00	25.10	17.25	17.38	17.52
Professional	12.00	14.00	16.00	15.00	15.00	14.00	13.00	11.00	11.00	20.53	15.78	10.05	9.52
Professional Crossovers	11.00	14.00	15.00	17.00	17.00	17.00	13.00	12.00	13.00	23.32	15.47	13.15	13.49
Nursing Home	10.00	17.00	17.00	15.00	14.00	14.00	14.00	15.00	15.00	15.76	28.24	14.90	23.77
Nursing Home Crossovers	9.00	9.00	16.00	17.00	11.00	12.00	18.00	15.00	9.00	22.60	14.33	19.00	24.66
Miscellaneous	14.00	14.00	19.00	21.00	24.00	24.00	17.00	18.00	17.00	22.97	21.12	17.57	17.71
Miscellaneous Crossovers	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	26.39	19.28	18.75	18.41
Average for the Month	12.00	13.00	16.00	16.00	***16.00	16.00	13.00	14.00	12.00	20.12	16.00	11.64	11.30

* The reporting of average processing days before April 2005 did not include information by Plan. Previously stated numbers are now reported only in the Total section of this report.

** Average processing days on claims adjustments used to be reported by the previous administrator. Average processing days will not be reported on claim adjustments beginning with April 2005. Therefore, they have not been reported in this report for any month.

*** Higher than normal claim average resulting from clean up of aged medical review claims

Due to the transition of HIRSP plan administrator services to a new contractor effective April 1, 2005 claims volumes and payments and other operational statistics will be different than previous months and should not be used for comparisons.

**WISCONSIN HEALTH INSURANCE RISK SHARING PLAN
HIRSP CLAIMS INVENTORY AS OF JULY 2005 MONTH END (7/27/2005)**

Pended Claims Data	Jul 2004* # of Claims	Aug 2004* # of Claims	Sep 2004* # of Claims	Oct 2004* # of Claims	Nov 2004* # of Claims	Dec 2004* # of Claims	Jan 2005* # of Claims	Feb 2005* # of Claims	Mar 2005** # of Claims	Apr 2005*** # of Claims	May 2005*** # of Claims	June 2005** # of Claims	July 2005** # of Claims
Prior to Entry													
Total										1,056	1,443	1,087	747
Pre-System Suspend													
Plan 1A										3,954	1,734	1,292	854
Plan 1B										2,946	1,284	926	721
Plan 2										2,318	1,035	1,420	1,066
Total									20,482	9,218	4,053	3,638	2,641
Total Over 30 Days Old										1,696	736	322	64
System Pended													
Plan 1A													
Inpatient Hospital										232	256	140	142
Inpatient Hospital Crossovers										2	2	0	0
Outpatient Hospital										759	660	519	564
Outpatient Hospital Crossovers										20	10	6	10
Professional										4,347	3,606	2,908	3,091
Professional Crossovers										46	34	35	40
Nursing Home										29	25	25	27
Nursing Home Crossovers										0	0	0	0
Miscellaneous										1,146	873	684	790
Miscellaneous Crossovers										3	2	11	3
Total Plan 1A										6,584	5,468	4,328	4,667
Total Over 30 Days Old										1,856	1,778	1,163	856
Plan 1B													
Inpatient Hospital										143	144	95	106
Inpatient Hospital Crossovers										2	2	1	0
Outpatient Hospital										495	517	397	429
Outpatient Hospital Crossovers										14	7	5	12
Professional										3,218	2,773	2,163	2,426
Professional Crossovers										23	26	16	26
Nursing Home										8	2	6	8
Nursing Home Crossovers										0	0	0	0
Miscellaneous										667	566	390	461
Miscellaneous Crossovers										7	2	2	1
Total Plan 1B										4,577	4,039	3,075	3,469
Total Over 30 Days Old										1,360	1,296	936	620
Plan 2													
Inpatient Hospital										3	1	3	5
Inpatient Hospital Crossovers										40	28	25	33
Outpatient Hospital										60	46	35	42
Outpatient Hospital Crossovers										329	252	292	275
Professional										147	87	128	141
Professional Crossovers										1,741	1,303	1,092	1,024
Nursing Home										2	3	2	1
Nursing Home Crossovers										18	19	8	21
Miscellaneous										109	101	62	68
Miscellaneous Crossovers										557	429	321	407
Total Plan 2										3,006	2,269	1,968	2,017
Total Over 30 Days Old										694	526	329	152
Total													
Inpatient Hospital	112	99	129	230	228	142	127	169	0	378	401	238	253
Inpatient Hospital Crossovers	14	13	8	19	17	7	15	22	0	44	32	26	33
Outpatient Hospital	609	818	983	1,040	1,002	963	699	969	0	1,314	1,223	951	1,035
Outpatient Hospital Crossovers	214	256	422	447	581	540	247	403	0	363	269	303	297
Professional	3,104	5,690	7,073	7,344	8,292	6,457	5,872	5,322	0	7,712	6,466	5,199	5,658
Professional Crossovers	381	836	1,587	1,483	1,643	1,564	580	1,190	0	1,810	1,363	1,143	1,090
Nursing Home	1	6	7	9	8	4	15	13	0	39	30	33	36
Nursing Home Crossovers	2	2	1	6	2	2	3	1	0	18	19	8	21
Miscellaneous	449	379	617	863	1,137	865	728	836	0	1,922	1,540	1,136	1,319
Miscellaneous Crossovers	0	0	0	0	0	0	0	0	0	567	433	334	411
Total	4,886	8,099	10,827	11,441	12,910	10,544	8,286	8,925	0	14,167	11,776	9,371	10,153
Total Over 30 Days Old	1,435	1,198	989	1,437	1,813	1,897	651	868	0	5,606	4,336	2,750	1,692
Grand Total	4,886	8,099	10,827	11,441	12,910	10,544	8,286	8,925	20,482	24,441	17,272	14,096	13,541

* The reporting of inventory numbers before April 2005 did not include information by Plan. Previously stated numbers are now reported only in the Total section of this report.

** Prior administrator claim inventory is zero due to transition of plan administration to WPS. 1,807 claims were pending and transferred to WPS on March 31st. WPS received 20,482 HIRSP claims from providers and the prior administrator during the period 3/14/2005 - 3/31/2005.

*** Claim adjustments have been reported in the non-Crossover categories on history prior to April 2005. Claim adjustments are not included in any category beginning with April 2005.

Due to the transition of HIRSP plan administrator services to a new contractor effective April 1, 2005 claims volumes and payments and other operational statistics will be different than previous months and should not be used for comparisons.

WISCONSIN HEALTH INSURANCE RISK SHARING PLAN

MEDICAL CLAIMS DENIED REPORT*

As of July 2005 Month End (7/27/2005)

Processed Month	Plan 1A		Plan 1B		Plan 2		All Plans			Denial Rate
	Paid	Denied	Paid	Denied	Paid	Denied	Paid	Denied	Total	
June 2004	14,539	5,511	9,098	3,723	4,916	2,340	28,553	11,574	40,127	28.8%
July 2004	11,258	4,409	7,199	3,018	3,743	1,643	22,200	9,070	31,270	29.0%
August 2004	11,398	4,318	7,676	3,016	3,924	1,423	22,998	8,757	31,755	27.6%
September 2004	16,461	5,752	11,535	3,880	5,751	2,013	33,747	11,645	45,392	25.7%
October 2004	12,686	4,232	9,584	3,458	4,389	1,540	26,659	9,230	35,889	25.7%
November 2004	16,889	5,819	12,715	4,376	6,458	2,602	36,062	12,797	48,859	26.2%
December 2004	12,980	4,239	9,710	3,192	4,542	1,741	27,232	9,172	36,404	25.2%
January 2005	12,985	5,197	9,862	3,935	4,884	2,011	27,731	11,143	38,874	28.7%
February 2005	9,529	3,403	7,389	2,752	3,297	1,479	20,215	7,634	27,849	27.4%
March 2005	10,223	2,143	7,789	1,678	4,185	1,109	22,197	4,930	27,127	18.2%
April 2005	18,903	4,196	14,308	3,387	7,814	2,475	41,025	10,058	51,083	19.7%
May 2005	18,296	3,908	14,232	3,010	7,388	2,385	39,916	9,303	49,219	18.9%
July 2005	13,476	3,119	10,537	2,198	6,350	2,121	30,363	7,438	37,801	19.7%

* Claims denied by the PBM are not included. See page 30 for claims denied by the PBM.

A claim may have some paid lines and some denied lines. Therefore, a claim that has both paid and rejected lines has been counted as a paid claim and as a denied claim. This results in more total claims being reported in this report than in the report titled Claims That Have Finalized to Payment or Denial Report.

END OF MONTH JULY 2005 DENIAL REASON DETAIL

Denial Reason	Volume	Top 10 Reasons for Denial
18/DU	2,772	DUPLICATE CLAIM/SERVICE
23	584	CLAIM DENIED/REDUCED BECAUSE CHARGES HAVE BEEN PAID BY ANOTHER PAYER AS PART OF COORDINATION OF BENEFITS
51	570	THIS IS A PREEXISTING CONDITION. MEDICAL RECORDS OBTAINED FROM YOUR PROVIDER HAVE IDENTIFIED A PRE-EXISTING CONDITION
49	495	NONCOVERED SERVICES BECAUSE THIS IS A ROUTINE EXAM OR SCREENING PROCEDURE DONE IN CONJUNCTION WITH A ROUTINE EXAM
27/28	452	EXPENSE(S) INCURRED OUTSIDE COVERAGE PERIOD ARE NOT COVERED
EM	368	WE NEED THE MEDICARE EXPLANATION OF BENEFITS TO PROCESS THIS CHARGE
HW	353	SERVICES PERFORMED BY A PROVIDER THAT IS NOT MEDICAID CERTIFIED ARE NOT COVERED
IS	259	THIS PROCEDURE IS INCIDENTAL TO AND CONSIDERED PART OF THE PRIMARY PROCEDURE
XZ	227	WE WILL COMPLETE PROCESSING OF THIS CLAIM WHEN WE RECEIVE THE REQUESTED MEDICAL RECORDS
V4	130	ONLY ONE SERVICE CODE OF THIS TYPE IS ACCEPTED ON A SINGLE DAY

Due to the transition of HIRSP plan administrator services to a new contractor effective April 1, 2005 claims volumes and payments and other operational statistics will be different than previous months and should not be used for comparisons.

**WISCONSIN HEALTH INSURANCE RISK SHARING PLAN
PHARMACY CLAIMS DENIED REPORT
As of July 2005 Month End (7/31/2005)***

Processed Month	Denied
July 2004	8,570
August 2004	8,297
September 2004	9,048
October 2004	13,104
November 2004	8,873
December 2004	8,555
January 2005	8,664
February 2005	7,627
March 2005	8,304
April 2005	25,472
May 2005	21,252
June 2005	16,979
July 2005	18,594

END OF MONTH JULY 2005 DENIAL REASON DETAIL

Top 10 Reasons for Denial	Volume
DUR Rejected Error-Interaction Drugs	6,589
NDC Not Covered	5,523
Plan Limitation Exceeded	3,192
Refill Too Soon	1,182
Missing/Invalid Dispense as Written Code	556
Duplicate Paid/Captured Claim	332
Filled After Coverage Terminated	227
Non-Matched Cardholder ID	198
Missing/Invalid Birth Date	152
Submit Bill to Other Processor/Primary Payer	127

*** Each prescription processed and denied is counted as one claim**

Note the different end of month date from previous reports in this packet. This is due to these figures being taken from a production PBM report rather than from the current HIRSP plan administrator's reporting files.

WISCONSIN HEALTH INSURANCE RISK SHARING PLAN

Claims Accuracy Performance *

July 2005

Medical

Month	Total Number of Claims	Total of Claims Payments	Total Claim Payments Reviewed	Total Correct Payment	Accuracy Rate
August-2004	31,270	\$5,264,531.00	\$49,875.00	\$49,875.00	100
September-2004	31,755	\$4,024,798.00	\$86,524.00	\$86,524.00	100
October-2004	45,392	\$8,169,270.00	\$63,287.00	\$63,287.00	100
November-2004	35,889	\$6,631,268.00	\$79,182.00	\$79,156.00	99.97
December-2004	48,859	\$9,595,500.00	\$52,645.00	\$52,645.00	100
January-2005	36,404	\$6,551,366.00	\$95,201.00	\$95,201.00	100
February-2005	38,874	\$6,256,306.00	\$80,016.00	\$80,016.00	100
March-2005	27,849	\$5,125,139.00	\$58,769.00	\$58,769.00	100
April-2005	28,646	\$4,001,294.29	\$67,258.90	\$67,605.30	99.49
May-2005	46,570	\$8,593,111.00	\$77,521.77	\$76,450.29	98.60
June-2005	44,024	\$10,505,466.00	\$66,752.92	\$64,063.42	99.06
July-2005	38,336	\$7,386,440.00	\$94,437.38	\$94,034.95	99.88

* This report is prepared on a processed date basis using all dates in a calendar month versus other reports that are prepared on a schedule that uses the standard end of month processing dates. Therefore, claims data in this report will not agree with claims data on other reports.

Due to the transition of HIRSP plan administrator services to a new contractor effective April 1, 2005 claims volumes and payments and other operational statistics will be different than previous months and should not be used for comparisons.

Wisconsin Health Insurance Risk Sharing Plan

Appeals and Grievance

July, 2005

Claim Appeals

Total Claim Appeals Received	25
Billing/Claim Processing	4
Drug & Drug Formulary	12
Not Covered Benefit	1
Plan Administration	2
Prior Authorization	6
 Total Claims/Reinstatements Closed	 30
Claim Appeals Average Number of Days	4.83

Grievances

Grievance Committee	
Drug & Drug Formulary	2
Enrollment/Eligibility Requirements	3
Plan Administration	2